

# APPLICATION FOR PERFORMANCE RIGHTS

*For copyright opera*



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**Current as of 8/01/08**

*The following information is required for the preparation of Grand Right Performance quotes. New Choreographies must also submit a Dance Clearance Form.*

***Rights are not automatically granted and are subject to approval. Please DO NOT commence advertising and rehearsal until you have received written confirmation that rights are available.***

|  |                              |
|--|------------------------------|
| <b>Composer:</b>   |                              |
| <b>Arranger/Editor:</b>  | <b>Publisher (if known):</b> |
| <b>Title (list movements if not performing complete work):</b>                         |                              |
| <b>Other music to be performed (please provide an attachment if insufficient room)</b> | 1. _____ Duration _____      |
|  | 2. _____ Duration _____      |
|  | 3. _____ Duration _____      |
| <b>Producer Name:</b>  |                              |
| <b>Promoter Company:</b>   |                              |
| <b>Contact Name:</b>   |                              |
| <b>Address:</b>  |                              |
| <b>Telephone (Business):</b>   | <b>(Home):</b>               |
| <b>Fax:</b>  | <b>Email/website:</b>        |

|                            |                          |
|----------------------------|--------------------------|
| <b>Name of Production:</b> | <b>Choreographer:</b>    |
| <b>Orchestra /Choir:</b>   | <b>Conductor:</b>        |
| <b>Venue:</b>              | <b>Seating Capacity:</b> |

|  |              |                                      |              |
|--|--------------|--------------------------------------|--------------|
| <b>Total Program Running Time:</b><br><i>(excluding intervals)</i> |              | <b>Number of Performances:</b>       |              |
|  | ___/___/20__ | ___/___/20__                         | ___/___/20__ |
| <b>Dates of Performances</b>                                       | ___/___/20__ | ___/___/20__                         | ___/___/20__ |
|  | ___/___/20__ | ___/___/20__                         | ___/___/20__ |
|  | ___/___/20__ | ___/___/20__                         | ___/___/20__ |
| <b>Ticket Price/s:</b>   |              | <b>Expected no. of ticket sales:</b> |              |
| <b>Expected no. of Complimentary tickets:</b>                      |              | <b>Gross Box Office estimate: \$</b> |              |

| <b>Will the performance of the above work involve the following?</b>   | <b>Yes / No</b> |
|--|-----------------|
| Acting   |                 |
| Costumes   |                 |
| Scenic Accessories   |                 |
| Scripted Dialogue  |                 |
| Other Dramatic Effects   |                 |
| Dance Sequence or Ballet   |                 |
| Do you intend to parody or change lyrics in anyway?  |                 |
| Do you intend to alter the music in any way?   |                 |
| Do you intend to change the setting in any way? (refers specifically to dramatic works)  |                 |
| Do you intend to record this performance?  |                 |
| <b>If you answered YES to any of the above questions, please provide all details. Please feel free to provide attachments if there is insufficient room.</b> |                 |
|  |                 |

**Materials required (if applicable)**

|  |     |  |     |         |
|--|-----|--|-----|---------|
| Orchestral Set   |     | Vocal Scores   |     |         |
| Chorus scores (S)  | (A) | (T)  | (B) | (child) |
| <i>*If the required material is not in stock</i> , please order materials from the publisher ( <b>at client's expense</b> ) by ( <input type="checkbox"/> ) <b>Airmail</b> ( <i>allow 6 weeks if available</i> ) or ( <input type="checkbox"/> ) <b>Courier</b> ( <i>within 2 weeks if available</i> ).<br><b>(Please tick one.)</b> |     |  |     |         |
| <b>Date materials required</b>   |     | For applications that need to be processed immediately, a <b>\$40.00 priority fee</b> will apply |     |         |
| / / 2008   |     |  |     |         |
| <b>Despatch Name (if different from above):</b>  |     |  |     |         |
| <b>Despatch Name (must be a street address):</b>   |     |  |     |         |
|  |     |  |     |         |
| <b>Despatch contact number:</b>  |     |  |     |         |

**Office use only**

|                |                 |
|----------------|-----------------|
| JOB            | HIRE            |
| DATE PROCESSED | ROYALTY RATE    |
| CODE           | ROYALTY MINIMUM |
| SET            | BOOKING         |
| LOCATION       | FREIGHT         |

# **Hal Leonard Australia Application for Licensing Rights**

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